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CLINICS.

Clinical Lecture on Delirium Tremens.
Delivered at University College Hospital.
By Dr. C. J. B. WILLIAMS, F. R. S.

We have had several cases of delirium tremens lately, and I shall take this opportunity of making a few remarks on that disease in general, as well as on the peculiarities which each case presented.

You will find stated pretty broadly in systematic works what are the characteristics of delirium tremens, and what is the treatment which is generally successful. But we must remember that systematic medicine is one thing, and clinical medicine another. It is not my part to say that systematic medicine is of no use; on the contrary, it is of very great service; but it is not everything. It is impossible, by systematic medicine, to teach you all the phases of disease, and it is absolutely necessary to study it at the bed side, in order to be aware of the varieties which it presents, and to be capable of treating it successfully—to meet

these varieties, in fact, as you should do, by a corresponding variety in treatment.

Delirium tremens, both practically and pathologically considered, may be defined to be a disease of excitement of the nervous system, leading to exhaustion, and requiring the use of composing remedies,—at least, chiefly. You commonly find practical men talking very largely about the entire and complete efficacy which opium has in the treatment of this affection. Give plenty of opium, they say; give enough to put the patient to sleep, and you cure the disease. But in some cases, we have had to prove that this rule is far from being absolute. You have seen several cases in which opium has been given in large quantities, in quantities sufficient to produce sleep, and yet the disease has not been cured.

We will take the matter a little more nicely, and consider first of all what delirium tremens is. We will analyze it a little further than by merely saying that it is excitement with exhaustion. Sometimes the leading symptoms which characterize it are those of excitement of the nervous system,

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which prevent the rest of sleep to such a degree that ultimately the vital powers become exhausted. Sleep is intended as a means of restoring all the vital powers, and particularly supplying an additional force to the excito-motory power, and the cause of want of sleep is a matter which has not been sufficiently attended to. Many morbid phenomena prove to us that the sensorial functions, the functions connected with the mind, and the voluntary powers, act in some degree as a balance to the functions of the nervous system connected with involuntary power. When the sensorial functions are greatly excited, excited to an excessive degree, the excito-motory functions become comparatively exhausted. On the other hand, where the involuntary excito-motory functions are excessively excited, as in convulsive attacks, the voluntary powers are in abeyance—there is a state of coma, stupor, or something approaching to it. The two cannot be in a state of continual excitement long together; the continued excitement of both leads to exhaustion of both, or one more than the other; and the great purpose of sleep is not only to refresh and to strengthen the sensorial functions, but for a certain time to suspend them altogether—that is, they are altogether suspended when sleep is perfect—when there is no dreaming. Sleep is designed not only for the purpose of restoring the sensorial powers, but doubtless to give increased temporary energy to the excito-motory powers. And what do we see in a state of tranquil sleep? In tranquil sleep the excito-motory function is that on which life mainly depends; it is that on which the respiratory movements hang, and were it to fail, sleep would become disturbed in consequence of the person being brought to the verge of asphyxia. I might illustrate this by a great number of cases—for example, cases in which sleep is imperfect. The whole nervous functions being exhausted, whether from mental excitement or bodily fatigue, or intoxication, what is the result? When a person is over-fatigued, he is too tired to sleep. The excito-motory function is exhausted as well as the other, and hence there is not strength enough to keep the respiratory action in energy sufficient for the comfort of the individual. The consequence is, he soon awakes, the sleep is disturbed, he starts with a feeling of nightmare, or oppression, and has to exert his voluntary muscles to supply by their move-

ments what is wanting in the excito-motory function. This is the reason of imperfect sleep from over exhaustion.

But the excitement of the whole nervous system which exists in delirium tremens is not dependent alone on loss of sleep. In addition to continued irritation by the alcoholic stimulus to which the nervous system has been subjected, another cause generally co-operates in these cases—that is, the absence of a sufficient amount of nutrition. Habitual drunkards are always tippling, but they do not eat; they have no appetite, no powers of digestion; and the consequence is, that whilst they are in a state of continued intoxication, they are in a state of perpetual starvation. Inanition is induced, another cause of the exhaustion of the bodily powers generally, and of excitement of the nervous function in particular. It is well known that in all cases of inanition the bodily powers are depressed, but the nervous function is the last thus to suffer; it remains excited, in fact, in the midst of a general state of depression, as we see in cases of continued starvation, privation of food, and exhaustion from other causes. In excessive loss of blood, or drains of other kinds which exhaust extremely, we find that the nervous system remains excited even in the midst of weakness. These things have been illustrated by the experiments of Chossat on inanition, which show that the nervous system in these cases is not only the last to suffer in function, but the last also to suffer in structure, and the last to lose weight when animals are starved to death.

Now we know that this cause operates in the case of habitual drunkards; we know that they do not eat, from a want of relish, consequently that they are in a state with regard to the nutrition of the system approaching to starvation. This is another reason why exhaustion ensues. This view of the matter introduces us to another peculiarity of delirium tremens, and suggests to us another indication in the treatment in ordinary cases.

The indications of treatment are threefold. First, to compose that undue excitement of the nervous system which prevails, and which is exhausting the other powers. This is done by opium and other narcotics. Secondly, to support those functions which are failing, and which have been already so much exhausted that life may be in jeopardy. Although sleep is needed, yet strength is

required to support life, and although sleep be obtained, perhaps the excito-motory function may be exhausted so low, that it may prove the sleep of death—it may be a reduction to a state of sinking. Under such circumstances—and they often occur in extreme cases of exhaustion in connection with delirium tremens—it becomes a little leading indication to support the system by stimulants, and food if possible. But there is a third indication which should never be lost sight of in the treatment of delirium tremens; that is, to purify the system from the poison that is in it. If it be a case of recent debauch there is an alcoholic stimulant in the system, and the longer it remains there the more mischief it will do. And in these cases there are other poisons besides the alcoholic stimulant. The body is a source of poison to itself, and if the vital powers are greatly reduced in their energy, the process of self-purification will not go on; the excretory functions are imperfectly performed; the urine is no longer freely secreted; urea, which is a poison in itself, accumulates; the bile probably accumulates in like manner, and the result of this, in an extreme degree, is to cause a poisoning of the system. It may not operate in such a violent manner as to lead us to say that the system is overwhelmed by the poison, but it contributes its influence. The cases I have to read will illustrate this point, showing that as long as the excretions are defective the nervous excitement continues, or the patient remains in a state of exhaustion, and there is an imperfect performance of the other functions. It is therefore a leading object to *purify the system by means of an increase of the secretions*, and this is generally done practically by means of purgative and diuretic remedies. This is the systematic treatment of delirium tremens explained in its principles.

But now we come to clinical varieties of this affection—to cases, as we meet with them in practice; and nothing is so good a guide to our understanding this subject, and, after understanding it, to our treatment, as a proper view of the *modus operandi* of the cause of the disease—that is, its true pathology.

Intoxicating liquors, I have stated before, produce excitement of the nervous system; but that is not their simple effect. Perhaps I may appeal to the experience of some who are present, who know what the operation of intoxicating liquors is; and although such

experience is to be deprecated, yet we shall draw good out of evil, if evil has happened, taking a lesson from the past (without the need of repeating the experiment) to enlighten our minds for the good of others.

Intoxicating liquors affect three systems in particular—the nervous, the vascular and the secreting.

The effect of these liquors on the nervous system is, in the first place, stimulant and narcotic; and I must beg you to observe that these two effects vary considerably in different individuals, and in the same individual under different circumstances. With many persons they produce a state of wildness, excessive excitement, and that excitement not followed by any perceptible sopor or tendency to sleep. I have known many such cases in persons of nervous temperament, particularly excitable females; there no sleep ensues, and, as might be expected, the consequence in such cases is more pernicious, leads to more disturbance and exhaustion. But in most instances the secondary operation of intoxicating liquors is decidedly narcotic. In most instances a large dose of intoxicating liquors will speedily plunge a person into a state of sopor or coma; and, if it be excessive, that coma may be fatal. But short of this, we hear the familiar expression, that a good glass of brandy and water, or negus, or anything of that kind, is a very comfortable *night-cap*, and many get into the habit of taking it every night to promote sleep. With many, it has more that effect than any other; but it has that effect peculiarly in some states of the system, as after fatigue and exhaustion—when the fatigue and exhaustion are too much for sleep. Then a glass of brandy and water, something stiff, will prove a comfortable *quietus*—a *night-cap*. This illustrates the different operation of intoxicating liquors on the nervous system; I have already mentioned that they act in different ways on various parts of that system, but I have not time to dwell on that point.

But intoxicating liquors also act on the vascular system. Here their effect is twofold. In the first place it is stimulant, producing excitement, increased action of the heart, strong pulse, quickened circulation. They cause an increased glow and activity of circulation, perhaps by a direct influence on the production of animal heat; and indeed the result may be called directly stimu-

lant. Then the subsequent effect is that of exhaustion. The exhaustion of the vascular system produced by these liquors is in the ratio of the previous excitement. This is not the case with regard to the nervous system. The vascular system passes into a state of weakness in proportion to the degree in which it was previously excited. If this be excessive, there is great weakness of pulse, and other symptoms of vascular debility. This element of the operation of intoxicating liquors is furnished in different degrees by different individuals. The excitement will be greatest in a person of sanguine temperament. If there be any disposition to excitement of the brain or the heart, or any other part connected with the vascular system, these parts may, under these circumstances, suffer from excitement, and, as the result of it, inflammation may be induced. We find accordingly that inflammation of various organs sometimes arises directly from the stimulating influence of intoxicating liquors. Bear that in mind with regard to the brain. The brain is one of the organs which is the first to suffer; and phrenitis, inflammation of the brain, of meningitis, inflammation of the membranes of the brain, and indeed every variety of inflammation of this organ, has been produced directly by intoxicating liquors. On the other hand, the weakness which follows this excitement is more likely to take place in persons of phlegmatic temperament.

Thirdly, intoxicating liquors operate on the secreting system. I have separated this from the vascular system, for the effect produced on that is not always proportioned to the excitement produced on this. Very different effects are apt to result from the disproportion between the two. The result of excitement on the secretion of the liver, the intestinal surface, the kidneys, and all other secernent organs, is to produce an increased flow; and this is exhibited also in various degrees in different individuals. It is well known that some cannot drink any amount of intoxicating liquor without the kidneys being excited to an extreme degree, and acting very freely under it. These are the persons with whom such liquors produce least mischief. There can be no doubt at all that the secreting system is a safety valve for this as for other poisons. So long as this safety valve is free, the increased stimulus and other injurious effects can be carried off by it, and so far the mischief resulting

from them may, with regard to this element, be but small. But what is the effect of the continued excitement of the secreting system? It is exhaustion. You cannot go on stimulating a secreting organ long without fatiguing it, if I may use the expression. There is a certain amount of vital power appropriated to each structure, and if the structure be taxed beyond that power it fails in function, and consequently the function ceases, or is more or less impaired. What is the result! The failure of the secreting function, to the value of which I just now alluded. This failure acts as a blockade to the system, stopping up all the channels by which the system is freed from poisons, extraneous or intrinsic. This we find occurring in the long run in habitual drunkards. Although their secreting organs may serve them long, and save them from many evils—and the longer they serve them, the longer they can save them—yet, by and by, they get tired and worn out, their function and structure suffer, and then comes the tide of evils which close the scene of the lives of drunkards. You know what they are—cachectic diseases of various kinds, dropsy in particular, degeneration of structure, and a host of other affections, of which gout, rheumatism, gravel, and similar disorders may be considered the slighter degrees.

(To be continued.)

SKETCHES AND ILLUSTRATIONS OF MEDICAL DELUSIONS.

A Miraculous Cure, in the Nineteenth Century.—A wonderful recovery is stated to have occurred at Orleans last May, through the intercession of the venerable servant of God, JOHN BATTISTA DE LA SALLE, the founder of the congregation of "Brethren of the Christian School." We briefly refer to it, intending to give it more at large after a rigorous examination shall have been made by the sacred "Congregation of Rites."

A young woman, Victoria Ferry, 20 years of age, of that city, whilst sewing, in the capacity of an attendant in the Insane Hospital, was attacked by one of the crazy inmates (a female) in the hall of the institution, and so severely beaten that she would have been instantly killed had not two persons come to her aid and saved her from the raving maniac.

Soon after being carried to her room and put to bed, she was seized with a flow of

blood from her mouth and eyes, which was accompanied with rigors. Doctor Vallet, who was called to attend her, prescribed various remedies, which proved of no avail. The patient grew daily worse.

The vomiting of blood continued constantly from day to day, which was supposed by her physician to come from her stomach and lungs. Her debility was extreme, so that, being unable to sit up, she was confined to her bed.

Doctor Vallet, who had charge of her case for the first seven years, considered that she laboured under an organic disease of the heart.

During the last eight of the twelve years of her disease her fever never left her—the thirst being unquenchable. It was difficult to induce her to take anything, as the act of deglutition was difficult and increased the vomiting; the head, throat, breast, arms, legs and thighs were greatly swollen. The left side was larger than the right.

The attending physician having ceased his visits for years prior to the recovery, Dr. Champignon was called in. She was under his charge about three months, during which period he gave them no hope. He directed cataplasms to the heart and loins; but as the disease had been of so many years standing he pronounced her incurable. The use of leeches he suspended and her vomiting then became more frequent. Hot baths were substituted, which proved useless. During the last few years the extreme rites of the church were administered.

She had frequent attacks of syncope, and lay for three or four hours at a time in the arms of her mother, apparently dead.

Growing worse, and remedies proving useless, on the 18th May last she commenced a new one, by imploring, through the intercession of the venerable father, John Battista de la Salle, the Almighty to restore her to health, and in which the brethren of that school joined.

Meanwhile the disease continued; she passed the day in great and universal bodily pain, and at night was unable to sleep.

Suddenly the venerable father seemed present, saying, "Thou art healed." Every bad feeling ceased, and the next morning she arose from her bed and eat with a good and healthy appetite.

She continued thus for the following days, when, on the 26th, the day of Pentecost, her mother having bought her new clothes,

as the old ones had been given to the poor, thinking she would have no further occasion for them, she went without any assistance to mass, and returned alone, feeling no inconvenience therefrom.

Many persons who were in the church were persuaded of the extraordinary cure, surrounded and followed her; and others of the crowd came to learn the particulars. All praised God, and, weeping with joy, exclaimed, "A miracle."

The physician visited her and perceived no remains of the same or of any other disease, and which, according to the principles of medicine and the use of a thousand experiments, must be considered incurable.

Since then she has continued to enjoy, and does still enjoy, excellent health, and has not suffered either from a return of that or from any other malady.

All who have had any knowledge of this consider it a miraculous cure, and to this there is not one dissenting voice.

Translated from the "*Notizie del Giorno*," published at Rome, April 30th, 1845.

MEDICAL NEWS.

DOMESTIC INTELLIGENCE.

Baltimore College of Dental Surgery.—It is stated in the American Journal and Library of Dental Science, (Dec., 1845,) that the faculty of the Baltimore College of Dental Surgery have made arrangements by which practical instruction may be given upon the living subject, and the students may have opportunities of performing dental operations under the eye of the Professor of practical dentistry.

Museum of the Baltimore College of Dental Surgery.—A very valuable contribution was made to the museum of this institution, a few weeks since, by Dr. JOHN HARRIS, consisting of between twelve and fifteen thousand morbid dental specimens. Similar contributions would be thankfully received by the faculty from other members of the profession.—*The American Journal and Library of Dental Science*, Dec., 1845.

Castleton Medical College.—At the commencement on Wednesday, 26th Nov., the degree of M. D. was conferred on 36 of the class. The number of students was 140.

Berkshire Medical Institution.—The last term the class numbered 142. At the commencement, on the 12th Nov., the degree of M. D. was conferred on 35.

Obituary Record.—It is with regret that we have to record the death of Dr. DOUGLAS HOUGHTON, State Geologist of Michigan, who was drowned in Lake Superior on the evening of 13th Oct. last.

FOREIGN INTELLIGENCE.

Existence of Air in Living Bodies.—Dr. HÜTER, of Marburg, at the meeting of the German Association of Natural Philosophers, in Sept. last, quoted a case, in which, in consequence of narrowness of the pelvis, the Cæsarian operation was proposed. The female, however, refused to submit to it. The pulsations of the heart of the fœtus were affected by a peculiar trembling. The child was afterwards born without the operation, and air was noticed in the umbilical vessels and placenta. In addition to this, the whole vascular system, and the bronchi of the infant, contained air. Professor Tourtual, of Munster, mentioned the case of an individual addicted to excessive beer-drinking, who suddenly died after a venesection for pneumonia, when air was discovered in the heart, vena cava, and brain. According to Kiewisch, this phenomenon is frequently met with in the bodies of drunkards. Counselor Harless said, that hydrogen was discovered in the veins long ago. Professor Rau stated the case of a man fifty years of age, who, after having used the hot water cure for rheumatism, was attacked by symptoms of apoplexy, and was directly bled; the blood was black, and flowed slowly, and a great many air bubbles followed, after which the blood flowed more freely, and the patient soon recovered. Dr. Blumhardt, of Stuttgart, related a similar case: venesection was performed in a case of tetanus, during which, at first blood and then air bubbles issued from the vein. Blood and air were alternately discharged, and ultimately the man died.—*Med. Times*, Oct. 11, 1845.

Extractive Matters in Urine.—Dr. SCHERER, of Würzburg, made some remarks at the same meeting, on the extractive matters of the urine. Having experimented for a year and a half on these matters, the constitution of which was previously lit-

tle known, the following are the principal facts which he has ascertained:—The greatest portion of the so-called extractive substance is nothing else but a colouring matter, nearly related to the colouring matter of the blood, and bile, and might, therefore, with propriety, be called the colouring matter of the urine; it may be thrown down from the urine by acetate of lead; and by treating the precipitate with alcohol and muriatic acid, it may be obtained in a pure state. In healthy individuals it yields from 62 to 63 per cent. of carbon, and from 6.2 to 6.4 per cent. of hydrogen. Whilst living on non-nitrogenized substances, the amount of carbon and hydrogen is augmented, especially if the exercise taken remains the same as usual, and the quantity of oxygen received is not increased. In fevers, especially, if the organic metamorphosis is augmented, unless the activity of the organs of respiration and the liver be at the same time excited, and especially if both these functions are languid, the amount of carbon may reach 66 to 67 per cent., and that of hydrogen 7.2 per cent. This increase in the quantity of the colouring matters abounding in carbon and hydrogen, may easily be demonstrated by boiling the urine in a small glass tube, and adding a little hydrochloric acid to it. Urine, which contains much of these carbonaceous colouring matters, by this treatment becomes of a dark colour, and, on cooling, deposits a brownish, blackish, or frequently an indigo-blue sediment, which easily dissolves in alcohol with a peculiar colour, being nothing else but the colouring matter of the urine. The slightest disturbance in the functions of the liver, or lungs, betrays itself by an alteration in the composition, being observed even at the period when anatomical changes in these organs have not yet occurred.—Scherer deduced from the results obtained by himself several conclusions of importance in a pathological and physiological point of view; from these it appeared that the colouring substance of the urine is formed from the hæmatin of the arterial blood, and that the higher the state of oxidation of the blood was, the less the amount of carbon that was contained in the urine; that, if the activity of the lungs and liver is declining, the kidneys partially perform their functions; the more extensively oxidation is augmented, the less intensely it acts; that the formation of the compound colouring matter of the urine is analogous to the formation of uric

acid and urea; that carbon and hydrogen do not increase in an equal ratio; and that, finally, a long-continued secretion of urine, rich in this colouring matter, mostly induces anæmia and considerable emaciation. Scherer exhibited specimens of the colouring matter extracted in his experiments upon urine.—*Med. Times*, Oct. 11, 1845.

Subcutaneous Puncture.—M. BLANDIN often employs the subcutaneous method of M. Guérin, in opening scrofulous abscesses and abscesses from congestion—a process which consists, as is already known, in making a puncture at the base of a fold of the skin, at some distance from the abscess, with a flattened trocar, and in withdrawing the pus by means of a *séringue à aspiration*, adapted to the canula of the trocar. The following is the last case which occurred in M. Blandin's practice:—The disease was an encysted scrofulous abscess in the armpit. The abscess was entirely emptied, and the usual dressing for subcutaneous wounds was afterwards applied. The next and the following days affairs went on as they usually do in such a case—that is to say, without the occurrence of any annoying symptom; the little wound made by the puncture immediately re-united; the tumour had disappeared, and the patient did not complain of the slightest pain. After the lapse of a fortnight the abscess re-appeared, but was of less size than before the operation. It was evacuated again in the same manner, and with the same results. Some time afterwards the abscess recurred, and was punctured for the third time, with an equal immunity from annoying symptoms, but was followed this time with complete efficacy—that is to say, that, after the third evacuation, the tumour totally disappeared, the cyst collapsed, and was not reproduced. In order to favour its resolution, mercurial frictions were practised after each operation. M. Blandin considers this plan of exceeding utility in those cases in which it is capable of application; and also that it is applicable in all cases of scrofulous abscesses.—*Med. Times*, Oct., 1845, from *Bouchardat's Annuaire* for 1845.

Extraction of Calculi from the Urinary Bladder.—Dr. CORNAY, of Rochefort, brings forward, for the extraction of small calculi, and of foreign bodies of small dimensions introduced into the bladder, a new plan, founded upon the facility of progression of

solid substances under the influence of aspiration. The instrument he employs consists in a catheter to which can be adapted a receiver and a syringe. An injection is made first into the bladder, and, by the aspiration of the piston the foreign body is carried into the receiver with the injected liquid. The instrument has been used, after many experiments on the dead subject, in several cases of gravel with decided advantage, in patients of Dr. Robert and Dr. Langier, surgeons of the Hôpital Beaujon.—*Med. Times*, Nov. 29, 1845.

Spontaneous Cure of external Aneurism.—Dr. MONTROL, in a paper presented to the French Academy of Medicine, relates three cases of external aneurism spontaneously cured. Prof. VELPEAU, who reported to the Academy on the subject of Dr. M's communication, directed the attention of the members more particularly to the following case, as presenting more interest than the other two.

CASE.—*Aneurism of the Coronary Artery of the Lower Lip.*—A pregnant woman, aged 23, presented a tumour of the size of a hazelnut at the right side of the lower lip. The disease had lasted for some time, when it ulcerated by the pressure of the teeth; hemorrhage was the immediate consequence, and was suppressed by compression of the coronary artery. The tumour which had, up to the period of ulceration, been the seat of pulsations isochronous with the pulse, ceased to beat; and its further progress was completely arrested, spontaneous cicatrization having taken place. The reporter observed that this case, as well as the two others, proved a fact which had already, from experience, received abundant demonstration, viz., that aneurism is occasionally susceptible of spontaneous cure, but could not be considered as an argument against the prudent practice of tying the diseased vessel.—*Ibid.*

Paralysis of the Serratus Magnus.—C., aged 18, a rope-maker, entered the Hôpital St. Louis, under M. JOBERT, 27th April, complaining of loss of power of the superior extremities. In the month of November, 1844, in consequence of excessive muscular exertion in the performance of the duties of his trade, the patient found the movements of the right arm very much impaired; the weakness soon extended to the left arm, and

at the same time the shoulders became deformed by the abnormal protrusion of the scapular regions; for four months before admission C. was not able to return to his business. On examination the scapulæ were found to be, as it were, raised from the thorax, and their inferior angles nearer to the spinous processes of the dorsal vertebræ than in the healthy subject. The voluntary movements of the arms were very much impaired; but pressure of the scapulæ against the walls of the chest, by the hands of an assistant, restored them almost completely, as in the case we have already referred to. Sensation was perfectly preserved in both arms. Stimulating frictions, blisters, the actual cautery, eight moxas applied along the spinal edge of the scapulæ, and electro-puncture, have been successively employed without producing any improvement whatever in the condition of the patient.—*Ib.*

Alkaline Preparations in Diseases of the Skin.—The exhibition of alkaline preparations internally in skin diseases is indicated in every form of eruption complicated by an acid condition of the gastric secretions; for the purpose of re-establishing the functions of the stomach, M. DEVERGIE recommends, therefore, the administration of the bicarbonate of soda in a bitter solution, an effervescent draught, or in combination with sugar. M. D. begins with twenty grains a day, and increases the dose gradually to one drachm, a quantity which he does not exceed. M. D. praises highly the external use of the carbonate of soda and potash; in papular and squamous affections he recommends baths, containing a half pound of the alkali, a half pound of gelatine, and one pound of common salt. The alkaline carbonate may be replaced by common soap, but the quantity of the latter must be three times more considerable than that of the former. The temperature of the bath should be low, a high degree of heat rendering the alkaline bath too stimulating to the cutaneous surface. For the treatment of psoriasis, Dr. D. advises the following ointment, which he has found beneficial:—*R.* Axungiæ 3j; Sodæ carbonat, gr. x to xx, and in lichen a similar one, containing twice the quantity of alkali. In eruptions of the scalp the dose may be considerably increased. The local application of alkaline substances calms very remarkably the sensation of itch-

ing, and relieves the tension of the skin; it should be continued for some time after cure has been effected.—*Ib.*

Clinical Researches on the exhibition of Kermes Mineral in Pulmonary Affections.—Dr. HERPIN has not found kermes so efficient in diseases of the pulmonary structure as it is stated to be; but in affections of the superior air-passages he has derived from it the greatest benefit. He goes so far as to consider kermes mineral as a specific against disorders of the superior respiratory tubes. In true croup Dr. H. has employed it as the "only" means of treatment, and obtained the most satisfactory results from its administration. In idiopathic and chronic laryngitis, kermes has again proved most serviceable. Dr. H. has also used the medicine with benefit in some cases of deafness, caused by chronic obstruction of the Eustachian tube; the dose at which the drug has been exhibited in these several cases, varied between one and twelve grains in the twenty-four hours; on the average from three to six grains daily. When three grains are taken in one dose, sickness is generally the immediate result. The drug must be given in extremely small doses to avoid nausea, and to obtain merely alterative effects; the hour after meals is the most favourable to its exhibition.—*Ibid.*

Obituary Record.—Died at Brighton, on the 28th Oct. last, after a short illness resulting from an attack of gout, SIR MATTHEW TIERNEY, in the 69th year of his age.

The death of CHRISTIAN FENGER, Director of the Royal Academy of Surgery in Copenhagen, chief surgeon to the King of Denmark, and the author of numerous professional works, is announced in the late foreign journals.

To Readers and Correspondents.—It is expected that the Lectures of Sir Benjamin Brodie will be completed in two more numbers of The News.

New Works.—Lea and Blanchard have nearly ready, Mütter and Liston's Lectures on the Operations of Surgery, in one octavo volume, with numerous cuts. They have also just issued the fifth part of Chelius' Surgery; and Budd on Diseases of the Liver, with numerous cuts and coloured plates.